

# Indiana Department of Correction, Division of Youth Services 2020 Juvenile Detention Inspection - Compliance Report



Lake County Juvenile Center  
3000 W. 93<sup>rd</sup> Avenue  
Crown Pointe, IN 46037

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## Auditors

Rachel McCaffrey, Director of Juvenile Detention Inspections, Indiana Department of Correction  
Terrie Decker, DYS Executive Director of Youth Services, Indiana Department of Correction  
Kristin Herrmann, Youth Law T.E.A.M. of Indiana  
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Indiana Department of Correction  
Division of Youth Services  
302 W. Washington St. Rm. E334, Indianapolis, IN 46204

**Indiana Department of Correction, Division of Youth Services  
2019 Juvenile Detention Inspection - Compliance Report**

Facility: Lake County Juvenile Center  
3000 W. 93<sup>rd</sup> Avenue  
Crown Pointe, IN 46037

Inspection Date: August 17, 2020

Auditors: Rachel McCaffrey  
Director of Juvenile Detention Inspections  
Division of Youth Services, Indiana Department of Correction  
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## **INTRODUCTION**

The 2020 annual juvenile detention facility evaluations conducted by the IDOC, Division of Youth Services would normally consist of three on-site facility inspections; staff and youth interviews; and an audit of the state detention standards. Due to the covid-19 global pandemic, we conducted one on-site facility inspection, along with staff and youth interviews, an audit of the state detention standards, and conducted testing on the candlelight levels and ventilation in accordance to the standards requirement.

While the proposed Indiana Juvenile Detention Facility Standards are in the process of being promulgated, Detention Facilities had the option to be audited on three hundred one (301) current detention standards or the corresponding two hundred and thirty-seven (237) proposed juvenile detention facility standards.

Lake County Juvenile Center chose to be audited on the two hundred and thirty-seven (237) proposed juvenile detention facility standards in 2020, for their 24th annual detention inspection. Of the two hundred and thirty-seven (237) standards audited, sixteen (16) standards require mandatory compliance and the remaining two hundred and twenty-one (221) are recommended standards. Compliance with 100% of the mandatory standards and 90% of the recommended standards is required to attain "Full Compliance." Again, Centers that chose to be audited on the proposed detention standards were only required to meet the expectation of the current detention standards. Lake County Juvenile Center chose to also provide documentation on the extra standards with exclusively new requirements. The breakdown of each audit listed below is only reflective of the current standards.

## FACILITY INFORMATION

<b>Facility county:</b>	Lake
<b>Governing authority:</b>	Lake County Juvenile Center
<b>Name of facility administrator:</b>	John Dempsey
<b>Detention Director:</b>	John Dempsey
<b>Detention facility's mission:</b>	Provide safe, secure temporary custody to juveniles adjudicated to the jurisdiction of the juvenile court who require physical restricted environment for their own safety or community
<b>Rated capacity:</b>	64
<b>Population on date of first audit:</b>	16
<b>Average daily population for the last 12 months:</b>	27.20
<b>Average length of stay for the last 12 months:</b>	40.60
<b>Minor upgrades since last audit (i.e. painting, flooring, bedding, furnishings):</b>	Touch up painting throughout building, pods, and medical department. Tissue holders installed in all restrooms and designated therapy room. Game room for staff residents.
<b>Major upgrades since last audit (i.e. plumbing, electrical, security system):</b>	Outside cameras were installed employee entrance, master locks installed A&B booth, outside loading dock door
<b>De-escalation techniques training:</b>	LCJC De-escalation
<b>Physical force techniques training:</b>	Aikido
<b>Chemical agents permitted:</b>	No
<b>Name of food service provider:</b>	LCJC employees
<b>Name of food service supervisor:</b>	Arenthia Green
<b>Name of health care authority individual or agency and license/certification:</b>	Dr. T Mullaly, MD – contract Diana Borom, RN – 40 hours (LCJC) Patricia Misalek, RN – 40 hours (LCJC)
<b>Name of mental health care authority individual or agency and license/certification:</b>	Katelyn Kapelinski – 40 hours Jill Miller, 2 days a week
<b>Education Services:</b>	The school is staffed by 4 licensed full time teachers, year round, who are all employed by LCJC.

## Lake County 2020 Audit

<b>Standards:</b>	<b><u>All Mandatory Standards, Security Standards, and Training Plan (8-3-52)</u></b>
<b>On-site Visit Conducted: August 17, 2020</b>	<ul style="list-style-type: none"> <li>• <b><u>Fifty-One Total Standards Audited</u></b></li> <li>• <b><u>16 Mandatory and 35 Recommended</u></b></li> <li>• <b><u>1 Administration Standard, 7 Safety Standards, 23 Security Standards, 3 Food Service and Hygiene Standards, 15 Medical Standards, and 2 Mental Health Standards</u></b></li> <li>• Number of Standards Not Applicable: 0</li> <li>• Number of Mandatory Standards in Compliance: 16</li> <li>• Number of Recommended Standards in Compliance: 34</li> </ul>
<b>Auditors:</b>	Rachel McCaffrey, Terrie Decker, and Kristin Herrmann (Inspection) Kristin Herrmann (Files)
<b>Facility Tour:</b>	The facility tour was conducted by Regina Robinson. This inspection focused on mandatory standards. Areas such as medical, janitorial closet, kitchen, visitation rooms, search areas, private interview rooms, youth rooms, youth living areas, personal and property areas, mechanical and safety areas were inspected. It was ensured that staff had access to the Emergency Manual.
<b>Youth Interviews:</b>	Two youths were interviewed, one male and one female.
<b>Youth Responses:</b>	Neither youth ever felt unsafe in the facility and felt that the facility was clean and the temperatures were comfortable. One youth said that there were three showers and one of them was closed. Neither one had any concerns about any medical attention they had received. One youth had the suggestions of commissary, better food, longer phone calls, and better tooth paste.
<b>Staff Interviews:</b>	Two line staff members were interviewed.
<b>Staff Responses:</b>	Both staff stated that they received fire extinguisher and emergency evacuation training when hired. They went through the process of emergency evacuation. All cells, even those that should be empty, will be opened and count will then be conducted. They explained that all movement is typed into the permanent log on the housing units. Both staff said that cuffs are a part of their uniform and they must have approval through their supervisor for use. They both said that they received health and mental health training. Lastly, the explained the process when a youth comes in needing to detoxify from alcohol, opiates, and other stimulants. The youth is medically cleared then put on medical watch for 24 hours.
<b>Non-compliant Standards:</b>	8-5-18

<b>Recommended Action:</b>	This standard was found in non-compliance because incident reports provided did not have all dates and signatures needed.
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<b>Standards:</b>	<b>Safety, Justice &amp; Order, and Education Standards</b>
<b>Desk Audit Conducted</b>	<ul style="list-style-type: none"> <li>• <b><u>70 Total Recommended Standards Audited</u></b></li> <li>• <b><u>27 Safety Standards, 37 Justice &amp; Order Standards, and 6 Education Standards</u></b></li> <li>• Number of Standards Not Applicable: 0</li> <li>• Number of Recommended Standards in Compliance: 70</li> </ul>
<b>Auditor:</b>	Rachel McCaffrey
<b>Youth Interviews:</b>	Two youths were interviewed, one male and one female.
<b>Youth Responses:</b>	Both youths confirmed they had received the facility handbook and had continued access. They understood the facility rules and punishments. One youth said they did not really agree with the punishments. When asked about the education program one youth said they were doing credit recovery in math, while the other did not have any set feelings on the education program.
<b>Non-compliant Standards:</b>	None
<b>Recommended Action:</b>	None

<b>Standards:</b>	<b><u>Food Service &amp; Hygiene, Medical, Mental Health, and Program Standards</u></b>
<b>Desk Audit Conducted</b>	<ul style="list-style-type: none"> <li>• <b><u>Fifty-Three Total Standards Audited</u></b></li> <li>• <b><u>16 Food Service &amp; Hygiene Standards, 13 Medical Standards, 4 Mental Health Standards, and 20 Programs &amp; Services Standards</u></b></li> <li>• Number of Standards Not Applicable: 0</li> <li>• Number of Recommended Standards in Compliance: 53</li> </ul>
<b>Auditor:</b>	Rachel McCaffrey
<b>Youth Interviews:</b>	Two youths were interviewed, one male and one female.
<b>Youth Responses:</b>	One youth felt that the food was okay, that some days are good and other days it is bad. They both confirmed that they received all the necessary items during intake. They said that they receive clean bedding every week and clean clothing every day. One youth said that they felt their medical and mental health was taken seriously and presented in a way that was understandable. They felt that it was also kept

	confidential.
<b>Non-compliant Standards:</b>	None
<b>Recommended Action:</b>	None

<b>Standards:</b>	<b><u>Administration Standards</u></b>
<b>Desk Audit Conducted</b>	<ul style="list-style-type: none"> <li>• <b><u>Sixty-One Total Standards Audited</u></b></li> <li>• <b><u>61 Administration Standards</u></b></li> <li>• Number of Standards Not Applicable: 0</li> <li>• Number of Recommended Standards in Compliance: 61</li> </ul>
<b>Auditor:</b>	Rachel McCaffrey
<b>Non-compliant Standards:</b>	None
<b>Recommended Action:</b>	None

Was the facility required to implement a corrective action plan as a result of the audit? **NO**/YES

**CONCLUSION**

Lake County Juvenile Detention Center chose to be audited on the proposed standards, which corresponds with the current (301) detention standards and received a score of 100% compliance with the mandatory standards and 99.54% of the recommended standards.

**The facility received a separate scoresheet indicating their level of compliance with the new proposed detention standards.**

Therefore, Lake County Juvenile Detention Center is in compliance with the 2020 Indiana Detention Center Standards Audit performed by the Indiana Department of Correction, Division of Youth Services.

A certificate of compliance will accompany this report, which becomes public information ten (10) days from the date of mailing

Please contact me at (812) 929-3980 should you have any questions concerning this report.

Respectfully submitted,

**Rachel McCaffrey**

Director of Juvenile Detention Inspections  
Indiana Department of Correction/Division of Youth Services

cc: Terrie Decker, DYS, Executive Director of Youth Services  
Honorable Thomas P. Stefaniak, Jr., Superior Court  
John Dempsey, Director  
Regina Robinson, Compliance Manager  
pursuant to 210 IAC 8-1-5(f)  
File